

114TH CONGRESS  
1ST SESSION

# S. 1574

To amend the Older Americans Act of 1965 to establish a community care wrap-around support demonstration program, a pilot project on services for recipients of federally assisted housing, and a national campaign to raise awareness of the aging network and to promote advance integrated long-term care planning, and for other purposes.

---

## IN THE SENATE OF THE UNITED STATES

JUNE 15, 2015

Mr. MERKLEY introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

---

## A BILL

To amend the Older Americans Act of 1965 to establish a community care wrap-around support demonstration program, a pilot project on services for recipients of federally assisted housing, and a national campaign to raise awareness of the aging network and to promote advance integrated long-term care planning, and for other purposes.

1       *Be it enacted by the Senate and House of Representa-*  
2       *tives of the United States of America in Congress assembled,*

## **1 SECTION 1. SHORT TITLE.**

2 This Act may be cited as the “Older Americans Com-  
3 munity Access Revitalization and Education Act” or the  
4 “CARE Act”.

## 5 SEC. 2. COMMUNITY CARE WRAP-AROUND SUPPORT DEM-

## ONSTRATION PROGRAM.

7       Part A of title IV of the Older Americans Act of 1965  
8   (42 U.S.C. 3032 et seq.) is amended by adding at the end  
9   the following:

10 "SEC. 423. COMMUNITY CARE WRAP-AROUND SUPPORT  
11 DEMONSTRATION PROGRAM.

12        "(a) DEFINITIONS.—

13               “(1) COMMUNITY CARE WRAP-AROUND SUP-  
14               PORT PARTNERSHIP.—The term ‘community care  
15               wrap-around support partnership’ means a partner-  
16               ship that—

17               “(A) carries out a program that serves not  
18               fewer than 30 eligible older individuals;

19                   “(B) includes—

“(i) a designated care coordinator,  
who may be a nurse, registered dietitian,  
case manager, health coach, or social worker,  
from an eligible entity and who, in consultation  
with a primary care physician or another relevant specialist described in  
clause (ii), will be responsible for coordi-

1 nating services and supports offered under  
2 title III for an older individual; and

3 “(ii) a consulting primary care physi-  
4 cian, or other relevant specialist, receiving  
5 compensation for participation in the part-  
6 nership in a manner determined by the As-  
7 sistant Secretary; and

8 “(C) may include an individual—

9 “(i) who is listed in the plan for the  
10 community care wrap-around support part-  
11 nership described in subsection (c)(2)(A);

12 “(ii) for whom the eligible older indi-  
13 vidual gives consent to participate in the  
14 community care wrap-around support part-  
15 nership, as that partnership relates to the  
16 eligible older individual; and

17 “(iii) whose relationship to the older  
18 individual is that of—

19 “(I) a family member, close per-  
20 sonal friend, or unpaid designated  
21 caregiver;

22 “(II) a legal or financial advisor;

23 “(III) a home care provider;

24 “(IV) a provider of transpor-  
25 tation;

1                         “(V) a registered dietitian; or  
2                         “(VI) a rehabilitation profes-  
3                         sional.

4                         “(2) ELIGIBLE ENTITY.—The term ‘eligible en-  
5                         tity’ means—

6                         “(A) an area agency on aging;  
7                         “(B) a home or community-based provider  
8                         of the activities described in subsection (d)  
9                         (such as a home care agency, or entity oper-  
10                         ating a senior center or adult day care facility);  
11                         or

12                         “(C) another qualified entity the Assistant  
13                         Secretary determines to be appropriate to carry  
14                         out the activities described in subsection (d).

15                         “(3) ELIGIBLE OLDER INDIVIDUAL.—The term  
16                         ‘eligible older individual’ means an older indi-  
17                         vidual—

18                         “(A) who is age 65 or older;  
19                         “(B) who is eligible to receive assistance  
20                         under this Act;

21                         “(C) who elects to enroll in the demonstra-  
22                         tion program, as described in subsection (e);  
23                         and

24                         “(D) who—

1                         “(i) has difficulty completing 2 or  
2                         more activities of daily living;  
3                         “(ii) has had at least 1 nonelective  
4                         hospital admission within the past 12  
5                         months;  
6                         “(iii) has received acute or subacute  
7                         rehabilitation services within the past 12  
8                         months; or  
9                         “(iv) meets such other criteria as the  
10                         Assistant Secretary determines to be ap-  
11                         propriate.

12                 “(b) PROGRAM AUTHORIZED.—

13                 “(1) IN GENERAL.—The Assistant Secretary  
14                         shall establish a demonstration program (referred to  
15                         in this section as the ‘demonstration program’ and  
16                         to be commonly known as the ‘community care ini-  
17                         tiative’) through which the Assistant Secretary shall  
18                         make grants to eligible entities in order to enable  
19                         such eligible entities to—

20                 “(A) establish community care wrap-  
21                         around support partnerships; and

22                 “(B) support the partnerships, enabling  
23                         the partnerships to carry out the activities de-  
24                         scribed in subsection (d).

1               “(2) DURATION.—Each grant awarded under  
2 this section shall be for a period of 2 years.

3               “(c) APPLICATION.—

4               “(1) IN GENERAL.—Each eligible entity desir-  
5 ing a grant under this section shall submit an appli-  
6 cation to the Assistant Secretary at such time, in  
7 such manner, and accompanied by such information  
8 as the Assistant Secretary may reasonably require.

9               “(2) CONTENTS.—The application described in  
10 this subsection shall include, at a minimum—

11               “(A) a plan listing the individuals, as de-  
12 scribed in subsection (a)(1)(C), that will, upon  
13 consent of an eligible older individual, partici-  
14 pate in the community care wrap-around sup-  
15 port partnership as that partnership relates to  
16 the eligible older individual;

17               “(B) a clear description of—

18               “(i) the protocols the eligible entity  
19 will implement to identify the needs of  
20 older individuals receiving services and  
21 supports through the partnership;

22               “(ii) the range of intervention and  
23 supportive services and supports that the  
24 eligible entity will implement; and

1                         “(iii) preliminary evidence of the effi-  
2                         cacy or effectiveness of the approach the  
3                         eligible entity proposes to use in providing  
4                         services and supports through the partner-  
5                         ship; and

6                         “(C) an assurance that the partnership will  
7                         collect the information determined by the As-  
8                         sistant Secretary under subsection (h)(1).

9                         “(d) USE OF FUNDS.—An eligible entity that receives  
10                         a grant under this section shall use the grant funds to  
11                         establish a community care wrap-around support partner-  
12                         ship and support the partnership, including requiring the  
13                         partnership to—

14                         “(1) connect each participant with the commu-  
15                         nity care wrap-around support partnership;

16                         “(2) assess each eligible older individual using  
17                         a standardized assessment instrument, such as a  
18                         comprehensive assessment reporting evaluation;

19                         “(3) establish longitudinal care plans for each  
20                         eligible older individual; and

21                         “(4) provide comprehensive, coordinated, and  
22                         continuous virtual or in-person access to the services  
23                         and supports offered under this Act, tailored to the  
24                         specific needs of the older individual involved, which  
25                         may include 1 or more of the following:

- 1                 “(A) Medication management.
- 2                 “(B) Medical nutrition therapy with a reg-  
3                 istered dietitian for individuals requiring dietary  
4                 modification for chronic disease management.
- 5                 “(C) Limited environmental modifications,  
6                 such as safety equipment for showering, bath-  
7                 ing, or toileting or installation of safety, health,  
8                 and wellness monitoring technologies for an eli-  
9                 gible older individual.
- 10                “(D) Nutritional and dietary supports,  
11                which may include nutrition counseling, edu-  
12                cation, and the delivery of meals to the home or  
13                assistance with purchasing groceries in order  
14                to—
- 15                “(i) assure an appropriate diet con-  
16                sistent with the medical needs, cultural  
17                background, and faith traditions of an eli-  
18                gible older individual; and
- 19                “(ii) identify opportunities for social-  
20                ization within the home or the community  
21                of an eligible older individual in order to  
22                enhance the ability to participate in  
23                healthy nutritional habits.

1               “(E) Transportation in order to meet the  
2               medical and social needs of an eligible older in-  
3               dividual.

4               “(F) Psychosocial supports to prevent iso-  
5               lation and the potential for depression and cog-  
6               nitive decline, which often accompany the lack  
7               of human interaction.

8               “(G) Opportunities for exercise, as toler-  
9               able and appropriate, to prevent further phys-  
10               ical decline that may lead to preventable dis-  
11               ability.

12               “(H) Opportunities for enjoyment through  
13               activities or interactions, in person or virtually,  
14               that enhance an eligible older individual’s life,  
15               relationships, well-being, or sense of produc-  
16               tivity, including providing the opportunities  
17               through the use of technology products.

18               “(e) ELECTION TO PARTICIPATE.—The Assistant  
19               Secretary shall determine and carry out an appropriate  
20               method of ensuring that eligible older individuals have  
21               agreed to enroll in a community care wrap-around support  
22               partnership program. Enrollment in the demonstration  
23               program shall be voluntary.

24               “(f) COMPLIANCE WITH OTHER LAWS.—

1                 “(1) REGULATIONS.—Notwithstanding any pro-  
2 vision of this section, each eligible entity receiving a  
3 grant under this section shall ensure that the activi-  
4 ties carried out under the grant comply with the reg-  
5 ulations promulgated pursuant to section 264(c) of  
6 the Health Insurance Portability and Accountability  
7 Act of 1996 (42 U.S.C. 1320d–2 note), the Health  
8 Information Technology for Economic and Clinical  
9 Health Act (title XIII of division A and title IV of  
10 division B of Public Law 111–5), and the amend-  
11 ments made by such Act.

12                 “(2) GUIDANCE.—The Assistant Secretary shall  
13 ensure that the activities carried out under this sec-  
14 tion are consistent with the guidance issued by the  
15 Secretary on June 6, 2014, for implementing stand-  
16 ards for person-centered planning and self-direction  
17 in home and community-based services programs,  
18 under section 2402(a) of the Patient Protection and  
19 Affordable Care Act (42 U.S.C. 1396n note).

20                 “(g) PARTNERSHIP INFORMATION COLLECTION.—

21                 “(1) DURING THE FIRST YEAR OF THE DEM-  
22 ONSTRATION PROGRAM.—

23                 “(A) IN GENERAL.—During the first year  
24 of the demonstration program, the community  
25 care wrap-around support partnership, through

1           the designated care coordinator described in  
2           subsection (a)(1)(B)(i), shall maintain a record  
3           for each eligible older individual who is served  
4           through the demonstration program. Such  
5           record shall include detailed information about  
6           the services and supports provided to the eligi-  
7           ble older individual through the demonstration  
8           program and shall be incorporated into the elec-  
9           tronic health record of the eligible older indi-  
10           vidual.

11           “(B) CONTENTS.—The Assistant Secretary  
12           shall determine the information to be collected  
13           in each record described in subparagraph (A),  
14           which may include information on the types of  
15           services and supports provided, referrals, mem-  
16           bers of the community care wrap-around sup-  
17           port partnership, and an impact statement on  
18           the health of the eligible older individual served.

19           “(2) DURING THE SECOND YEAR OF THE DEM-  
20           ONSTRATION PROGRAM.—During the second year of  
21           the demonstration program, in addition to maintain-  
22           ing the record described in paragraph (1), the des-  
23           ignated care coordinator described in subsection  
24           (a)(1)(B)(i) shall ensure that, through the record de-

1 scribed in paragraph (1), the community care wrap-  
2 around support partnership is able to—

3 “(A) determine gaps in the provision of  
4 services that can assist in the provision of com-  
5 prehensive health and wellness care for the eli-  
6 gible older individual;

7 “(B) connect the eligible older individual to  
8 services under this Act that will address any  
9 such gaps; and

10 “(C) subject to the consent of the eligible  
11 older individual, make appointments for the eli-  
12 gible older individual to receive needed services  
13 and ensure that the primary care physician and  
14 caregiver of such eligible older individual receive  
15 notice of the needs of such individual.

16 “(h) DETERMINATION OF THE DEMONSTRATION  
17 PROGRAM EFFECT ON PATIENT OUTCOMES.—

18 “(1) TRANSFER OF INFORMATION.—Each eligi-  
19 ble entity shall collect, from each community care  
20 wrap-around partnership supported by the eligible  
21 entity, and report to the Assistant Secretary (in  
22 such form and manner, and at such frequency, as  
23 shall be specified by the Assistant Secretary) such  
24 data as the Assistant Secretary determines to be ap-

1           appropriate to monitor and analyze the demonstration  
2           program.

3           “(2) INDEPENDENT ANALYSIS OF THE DEM-  
4           ONSTRATION PROGRAM.—The Assistant Secretary  
5           shall enter into an agreement with an entity to con-  
6           duct an independent analysis, in consultation with  
7           the Administrator for the Centers for Medicare &  
8           Medicaid Services, and make a determination of  
9           whether the activities described in subsection (d) re-  
10          sult in—

11           “(A) a reduced number of hospital days  
12           (other than days an eligible older individual  
13           elects to remain in the hospital);

14           “(B) reduced hospital readmissions for eli-  
15          gible older individuals;

16           “(C) reduced emergency room visits for eli-  
17          gible older individuals;

18           “(D) improved health outcomes commensu-  
19          rate, in each individual case, with the eligible  
20          older individual’s stage of chronic illness;

21           “(E) improved efficiency of care, such as a  
22          reduction of duplicative diagnostic and labora-  
23          tory tests, for eligible older individuals;

24           “(F) a reduced cost of health care services;

1               “(G) improved or maintained nutrition sta-  
2               tus, to manage chronic disease;

3               “(H) any delay of entry of eligible older in-  
4               dividuals into institutional care; and

5               “(I) any other outcomes measures the As-  
6               sistant Secretary determines to be appropriate.

7               “(3) IMPACT STUDY.—

8               “(A) EVALUATION.—The Assistant Sec-  
9               retary, in consultation with the Administrator  
10              for the Centers for Medicare & Medicaid Serv-  
11              ices and using the information and data col-  
12              lected under this subsection and subsection (g),  
13              shall conduct an evaluation of the demonstra-  
14              tion program, including comparing the well-  
15              being and costs of care of participants in a  
16              community care wrap-around support partner-  
17              ship program, to the well-being and such costs  
18              for patients who have not participated in such  
19              a program, to determine the impact of the addi-  
20              tional services and supports provided through  
21              such a program and shall prepare findings from  
22              the evaluation.

23               “(B) DETERMINATION ON EXPANSION.—  
24              Based on the evaluation conducted under sub-  
25              paragraph (A) and the independent analysis

1                   conducted under paragraph (2), the Assistant  
2                   Secretary, in consultation with the Adminis-  
3                   trator for the Centers for Medicare & Medicaid  
4                   Services, shall determine whether expansion of  
5                   the demonstration program is appropriate. If  
6                   the determination is that such expansion is ap-  
7                   propriate, the Assistant Secretary, in consulta-  
8                   tion with such Administrator, shall prepare a  
9                   plan specifying—

10                   “(i) whether the expanded program  
11                   should involve a greater number of grants  
12                   to eligible entities, for community care  
13                   wrap-around support partnership programs  
14                   based on subsections (a) through (g);

15                   “(ii) whether the expanded program  
16                   should involve grants to regional, state-  
17                   wide, or multi-State combinations of eligi-  
18                   ble entities to engage corresponding com-  
19                   munity care wrap-around support partner-  
20                   ships in corresponding areas, for such pro-  
21                   grams based on subsections (a) through  
22                   (g); and

23                   “(iii) whether the expanded program  
24                   should be carried out through the Adminis-

3                 “(4) REPORT TO CONGRESS.—Not later than 1  
4                 year after the end of the demonstration program,  
5                 the Assistant Secretary shall submit to Congress a  
6                 report containing the findings, the results of the  
7                 independent analysis, the determination, and any  
8                 plan, prepared under paragraphs (1) through (3).

9                 “(5) EXPANDED PROGRAM.—Subject to the  
10                 availability of appropriations, if the report contains  
11                 a plan prepared under paragraph (3)(B), the Assistant  
12                 Secretary may implement the expanded program,  
13                 in accordance with the plan, not sooner than  
14                 6 months after submission of the report.

15        “(i) IMPLEMENTATION DATE.—Not later than Janu-  
16 ary 1, 2016, the Assistant Secretary shall issue a request  
17 for proposals to carry out this section.

18       “(j) AUTHORIZATION OF APPROPRIATIONS.—There  
19 are authorized to be appropriated to carry out this section  
20 such sums as may be necessary for each of fiscal years  
21 2016 through 2018.”.

1   **SEC. 3. PILOT PROJECT ON SERVICES FOR RECIPIENTS OF**  
2                   **FEDERALLY ASSISTED HOUSING.**

3       Part A of title IV of the Older Americans Act of 1965  
4   (42 U.S.C. 3032 et seq.), as amended by section 2, is fur-  
5   ther amended by adding at the end the following:

6   **“SEC. 424. PILOT PROJECT ON SERVICES FOR RECIPIENTS**  
7                   **OF FEDERALLY ASSISTED HOUSING.**

8       “(a) DEFINITION.—In this section, the term ‘feder-  
9   ally assisted housing’ means—

10       “(1) multifamily housing financed, insured, or  
11   subsidized by the Rural Housing Service of the De-  
12   partment of Agriculture or by the Department of  
13   Housing and Urban Development; or

14       “(2) any housing with respect to which a credit  
15   is allowed under the low-income housing tax credit  
16   under section 42 of the Internal Revenue Code of  
17   1986.

18       “(b) FUNDING.—The Assistant Secretary may pro-  
19   vide funding for a service provided under this Act (includ-  
20   ing title V) packaged and targeted for residents of feder-  
21   ally assisted housing. The Assistant Secretary may provide  
22   such funding for a period of 2 years.

23       “(c) RECIPIENTS.—The Assistant Secretary shall  
24   provide funding made available under subsection (b)  
25   through area agencies on aging, other entities approved  
26   by the Assistant Secretary, or designees of the agencies

1 or entities, to not-for-profit owners or managers of the  
2 housing.

**3        "(d) EVALUATIONS AND REPORTS.—**

4               “(1) EVALUATIONS.—Each agency, entity, or  
5               designee that receives funding under this section  
6               shall evaluate the effectiveness of the services pro-  
7               vided through the funding.

8               “(2) REPORTS.—The agency, entity, or des-  
9       ignee shall, not later than 90 days after the end of  
10      the funding period, prepare and submit to the As-  
11      sistant Secretary a report containing the results of  
12      the evaluation.

13       “(e) AUTHORIZATION OF APPROPRIATIONS.—There  
14 are authorized to be appropriated to carry out this section  
15 such sums as may be necessary for each of fiscal years  
16 2016 through 2018. Such sums shall remain available  
17 through fiscal year 2019 for the purpose of carrying out  
18 the evaluations and reports under subsection (d).”.

19 SEC. 4. NATIONAL CAMPAIGN TO RAISE AWARENESS OF  
20 THE AGING NETWORK AND TO PROMOTE AD-  
21 VANCE INTEGRATED LONG-TERM CARE  
22 PLANNING.

23 (a) IN GENERAL.—Section 202(b)(6) of the Older  
24 Americans Act of 1965 (42 U.S.C. 3012(b)(6)) is amend-  
25 ed to read as follows:

1               “(6) promote, through a coordinated public  
2 education and outreach campaign carried out by the  
3 National Eldercare Locator Service described in sub-  
4 section (a)(21) and in coordination with other appro-  
5 priate Federal agencies—

6               “(A) enhanced awareness by the public of  
7 the importance of planning in advance for inte-  
8 grated long-term care; and

9               “(B) the availability of national, State, and  
10 local information and resources to assist in such  
11 planning, as well as the existence of area agen-  
12 cies on aging and other aging service providers  
13 to provide direct assistance with such plan-  
14 ning;”.

15               (b) AUTHORIZATION OF APPROPRIATIONS.—Section  
16 216 of the Older Americans Act of 1965 (42 U.S.C.  
17 3020f) is amended—

18               (1) by redesignating subsection (c) as sub-  
19 section (d); and

20               (2) by inserting after subsection (b) the fol-  
21 lowing:

22               “(c) NATIONAL CAMPAIGN ON INTEGRATED LONG-  
23 TERM CARE PLANNING.—There are authorized to be ap-  
24 propriated to carry out section 202(b)(6) such sums as

1 may be necessary for each of fiscal years 2016 through  
2 2018.”.

